

### **Amendment # 1**

This is an amendment to the contract entered into by and between the Indiana Department of Administration (IDOA) Procurement Division on behalf of All State Agencies (hereinafter referred to as "State") and The Morley Group (hereinafter referred to as "Contractor") dated April 26, 2004.

In consideration of the mutual undertakings and covenants hereinafter set forth, the parties agree as follows:

#### **Qualified Medication Aide (OMA)--(Nurse Attendant 4)**

The Contractor must provide the following documentation to the Using Agency before the employee can work:

- State Certification as a Qualified Medication Aide
- Verification of negative mantoux or chest x-ray, as required by Indiana State Department of Health (ISDH) Long Term Care rules (updated annually).
- Verification of criminal background check, as required by Long Term Care rules for State facilities.

Qualified Medication Aides perform a variety of non-professional tasks associated with the treatment of long term care residents to include but not be limited to:

Qualified Medication Aides (QMA) administers prescribed medications and treatments to residents in a long term care facility. They must document the administration of the medications and follow accepted policies and procedures for treatment administration, which could include blood sugar testing, oxygen administration, colostomy bag changes, or any other procedure allowed by Long Term Care rules.

#### **Prices for the various districts throughout the State are as follows:**

	1 <sup>st</sup> Shift Per Hour	2 <sup>nd</sup> Shift Per Hour	3 <sup>rd</sup> Shift Per Hour	Overtime Per Hour	Holiday Per Hour
LaPorte District	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
Fort Wayne District	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
Crawfordsville Dist.	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
Greenfield District	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
Seymour District	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
Vincennes District	\$26.25_	\$26.25_	\$26.25_	\$39.38_	\$52.50_
All Inclusive Price – All Districts	N/A__				

**Certified Nurse Aide (CNA)–(Nurse Attendant 5)**

The Contractor must provide the following documentation to the Using Agency before the employee can work:

- State Certification as a Certified Nurse Aide
- Verification of negative mantoux or chest x-ray, as required by Indiana State Department of Health (ISDH) Long Term Care rules (updated annually).
- Verification of criminal background check, as required by Long Term Care rules for State facilities.

Nurse Aides perform a variety of non-professional tasks associated with the treatment of long term care residents to include but not be limited to:

The main responsibility of the job is to provide direct resident care, which includes bathing, dressing, feeding, toileting, walking, transferring, grooming, nail care, and positioning in bed or chair for both elderly male and female residents who can no longer care for themselves.

**Prices for the various districts throughout the State are as follows:**

	1 <sup>st</sup> Shift Per Hour	2 <sup>nd</sup> Shift Per Hour	3 <sup>rd</sup> Shift Per Hour	Overtime Per Hour	Holiday Per Hour
LaPorte District	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
Fort Wayne District	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
Crawfordsville Dist.	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
Greenfield District	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
Seymour District	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
Vincennes District	\$23.13_	\$23.13_	\$23.13_	\$34.70_	\$46.26_
All Inclusive Price – All Districts	N/A__				

Total amount of this action is \$0.00 (N/A). Total remuneration of this contract is not to exceed \$ N/A.

All other matters previously agreed to and set forth in the original agreement and not affected by this amendment shall remain in full force and effect.

### Non-Collusion and Acceptance

The undersigned attests, subject to the penalties for perjury, that he/she is the contracting party, or that he/she is the representative, agent, member or officer of the contracting party, that he/she has not, nor has any other member, employee, representative, agent or officer of the firm, company, corporation or partnership represented by him/her, directly or indirectly, to the best of his/her knowledge, entered into or offered to enter into any combination, collusion or agreement to receive or pay, and that he/she has not received or paid any sum of money or other consideration for the execution of this agreement other than that which appears upon the face of the agreement.

In Witness Whereof, Contractor/Grantee and the State of Indiana have, through duly authorized representatives, entered into this agreement. The parties having read and understand the foregoing terms of the contract/grant do by their respective signatures dated below hereby agree to the terms thereof.

**Contractor:**

**The Morley Group**

By: Sharon M. Morley  
Printed Name: SHARON M. MORLEY  
Title: VICE PRESIDENT  
Date: 6/14/04

**State of Indiana Agency:**

**IDOA Procurement Division**

By: Teresa Deaton-Reese  
Printed Name: Teresa Deaton-Reese  
Title: Deputy Director  
Date: 6/17/04

**Information Technology Oversight  
Commission**

By: [Signature]  
Printed Name: [Signature]  
Title: [Signature]  
Date: [Signature]

**Department of Administration**

[Signature]  
Charles R. Martindale  
Commissioner  
Date: 6-17-04

**State Budget Agency**

[Signature]  
Marilyn F. Schultz  
Director  
Date: 6-21-04

**Office of the Attorney General**

[Signature] FOR  
Stephen Carter  
Attorney General  
Date: July 2, 2004